

Department of Public Health
and Human Services

Section:
ACRONYMS AND GLOSSARY

MEDICAL ASSISTANCE

Subject:
Acronyms and Glossary

Supersedes: MA 0-4 (01/01/06)

A

A & A—Veterans Administration Aid and Attendance

ABD—Aged/Blind/Disabled

ACE—Active Corps of Executives

ACS—The Montana Medicaid service payment contractor. Formerly known as Consultec.

ACV—Action Cooperative Volunteer Program

AFDC—Aid to Families with Dependent Children

ARM—Administrative Rules of Montana

ACCESS—As it relates to joint checking/savings accounts:

Restricted—Limited access to money in an account.

Unrestricted—Unlimited access to money in an account by one or all of the account holders.



ACTUARIALLY SOUND—For purposes of Medicaid resource eligibility, a situation where the amount expected to be paid to the holder of a payment contract within his or her lifetime (which could be a contract-for-deed, or an annuity, for example) meets or exceeds the original value of the contract. Actuarial soundness is determined by multiplying the periodic payment amount by the holder's life expectancy, and then comparing this to the value of the contract (for a contract-for-deed, the value of the contract is the original value of the contract; for an annuity, this is the purchase price of the annuity). If the total of expected payments to be received during the contract holder's lifetime is less than the original value of the contract, then the contract is not actuarially sound.

ADEQUATE NOTICE—Written notification to be received by the individual no later than the date of intended action or the date benefits would have been received. Notices must be mailed no later than two working days after TEAMS cutoff to meet adequate timeframes.

ADMINISTRATIVE MONTH—The calendar month preceding the benefit month(s) for which eligibility determination is reviewed.

ADULT CHILD—An individual whose legal or biological relationship to another is child, but who has reached the legal age of majority (18).



For purposes of determining exemption of a home, a “dependent adult child” is one who is dependent upon his/her parent(s) and is claimed on the parents’ income taxes (or if the parents did not file an income tax return but could claim the child if they did file one) as a dependent.

ADVERSE ACTION—A decision to deny, decrease, suspend or terminate the benefits.

AGED—Sixty-five (65) years of age or older.

AGED/BLIND/DISABLED MEDICAID—Term used to reference Medicaid programs serving aged, blind and disabled individuals. Aged/Blind/Disabled Medicaid uses the financial and some non-financial criteria of the SSI cash assistance program administered by the Social Security Administration. Aged/Blind/Disabled (ABD) programs have also been known as SS-related Medicaid.

ALERT—A system reminder to the worker to reevaluate case circumstances.

ALIEN—A person residing in the United States of America who is not a citizen.

ALIEN SPONSOR—A person or any public or private agency or organization who executed an affidavit of support (Form I-134) or similar agreement so that an alien could enter the United States.

ALIMONY—Court ordered payment made by one spouse or former spouse to another after a legal separation or divorce. Alimony is income to the recipient and, if court-ordered, an income disregard to the payer.

AMERICAN INDIAN OR ALASKA NATIVE—A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

ANCILLARY CHARGES—Fees for medical services (such as hospital, doctor, ambulance, prescriptions or therapy) which are not included in the cost of medical institutional care.

ANNUITY—A contract under which a sum is paid yearly or at other specific times in return for the payment of a fixed sum. Annuities may be purchased by an individual, an employer, or as part of a court ordered settlement. The annuity contract may be a resource, and the payments are countable income.

APPLICATION DATE—The date the completed and signed application form is received and date stamped in the County Office or designated outstation location.

ASIAN—A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

ASSISTANCE UNIT—Those members of the Filing Unit who are eligible to receive benefits. Composed of an aged, blind or disabled individual and his/her aged, blind, or disabled spouse.

AUTHORIZED REPRESENTATIVE—A person acting for an applicant/recipient through the individual's written authorization.

AVAILABLE—For resources: the condition of having direct or indirect access to property that can be used for the individual's needs. For income: is actually available; the applicant/ recipient has a legal interest in a liquidated sum with the legal ability to make such a sum available for support and maintenance. Includes income earned by the applicant, unearned income from any source, amounts deemed available from the applicant's ineligible spouse or alien sponsor (or parents if applicant is under 18 and blind or disabled), and the value of any support or maintenance received "in kind."

B

BEOG—Basic Educational Opportunity Grant

BIA—Bureau of Indian Affairs

BENDEX—SSA's Beneficiary Data Exchange System, which provides the amount of Retirement, Survivors, Disability Insurance (RSDI) Social Security benefits paid to people entered on the system. Also, BENDEX provides data on pensions and wages.

BENEFIT MONTH—Calendar month for which benefits are issued.

BLACK OR AFRICAN AMERICAN—A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”

BLIND ACCORDING TO SSA CRITERIA—Meets SSA’s definition of blindness for qualifying for blindness-related SSA benefits.

BONA FIDE—Good faith; without fraud or deceit.

BOND—A written obligation to pay a sum of money at a future specified time. A bond is a negotiable instrument.

BUDGET MONTH—The month that the financial and non-financial criteria of the unit are used to determine eligibility. Using prospective budgeting, the budget month is the same as the benefit month.

BUDGETING—Calculating the eligibility of the assistance unit for the benefit month.

BURIAL CONTRACT—A legal document that provides for funeral expenses and specifies the method of burial.

BURIAL FUNDS—Burial contract, burial trust, life insurance or other burial agreements (whether irrevocable, revocable, rescindable or non-rescindable) or any other separately identifiable funds which are clearly designated for burial expenses.

BURIAL SPACES—Conventional grave sites, crypts, mausoleums, urns, and other repositories which are customarily and traditionally used for the remains of deceased persons.

BUSINESS EXPENSES—The costs directly related to the production of income.

C

CA—Conditional Assistance

CD—Certificate of Deposit when used in financial context. Also used to refer to County Director.

CFR—Code of Federal Regulations

CHIMES—The Combined Healthcare Information and Montana Eligibility System.

CMS—Centers for Medicare and Medicaid Services (formerly HCFA). CMS is the federal agency responsible for the administration of the Medicaid programs.

CMV—Current Market Value

COBRA—Consolidated Omnibus Budget Reconciliation Act

COLA—Cost of Living Adjustment

CS—Community Spouse

CSIMA—Community Spouse Income Maintenance Allowance

CSRMA—Community Spouse Resource Maintenance Allowance

CALENDAR YEAR—January 1 through December 31.

CASE—Documents or computer data relating to a filing unit.

CASE FILE—The record maintained for each filing unit during the course of the assistance unit's participation in the program.

CASE MANAGEMENT—A series of steps to assist the case manager to formulate and develop a program for the recipient.

CASE MANAGEMENT TEAM—The provider and the state representative responsible for developing a plan of care as well as locating, coordinating and monitoring the delivery of Home and Community Based Services (HCBS/Waiver) for the client.

CASE MANAGER—The eligibility caseworker in the OPA office who provides case management.

CASH SURRENDER VALUE—The actual cash amount the insurer will pay upon cancellation of a life insurance policy. This value usually increases with the age of the policy, but is decreased by any outstanding loans against the policy.

CASH VALUE—For resources: the amount that would be received if the resource were sold or converted to cash. For income: the amount of the income or the value assigned to the service rendered for in-kind income.

CATEGORICALLY NEEDY—An individual or couple who meet all non-financial eligibility criteria and whose income does not exceed the categorically needy income limit.

CERTIFICATE OF DEPOSIT—See “Time Deposit”.

CHANGE IN CIRCUMSTANCE—A reversal or variation of the fact from what was previously known.

CHILD—The legal (biological or adopted) son or daughter of a parent. For aged, blind and disabled Medicaid purposes, this includes step-sons and step-daughters.

CHILD SUPPORT—Court ordered payment by an absent parent for the purpose of meeting the needs of his/her child(ren).

COLLATERAL CONTACTS—Knowledgeable individuals or sources who serve to support or confirm information.

COLLECTIBLES—Any item of value which may or may not be part of a collection, such as paintings, coins, stamps, etc.

COMMINGLED FUNDS—Countable and exempt funds that are combined in a bank, IIM, or other account.

COMMON LAW MARRIAGE—A legally binding marriage between a man and a woman who are competent to enter into marriage and who, without the benefit of a marriage license or ceremony, mutually consent and agree to a common law marriage, who then cohabit and who are reputed in the community to be husband and wife. Common law marriage is based on the couple living together for a “significant period of time,” holding themselves out as a married couple (may refer to one another as “my husband” and “my wife”, may file joint tax returns and may use the same last name), and who intend to be married. A common law marriage must be terminated by a formal legal divorce. Common law marriage is not recognized in all states, or on some Indian reservations.

COMMUNITY SPOUSE—A spouse who is not living in a residential medical institution or nursing facility or participating in the Medicaid HCBS waiver program.

COMPENSATION—Money, real or personal property, food, shelter or services received by an individual in exchange for goods or services provided by that individual.

CONFIDENTIAL INFORMATION—Applicant or recipient information that may only be shared for purposes of establishing eligibility, determining amount of assistance, and providing services, with related federally

mandated and assisted programs and agencies under contract to the Department or operating with a Memorandum of Understanding.

CONTRACT FOR DEED—A real estate transaction where the seller carries the buyer's obligation to pay the purchase price. The seller agrees to transfer the property deed to the buyer when all payments have been made. A contract for deed is a negotiable instrument.

CONVALESCENT LEAVE—A temporary release from a residential medical facility such as Montana State Hospital, without final discharge.

COUNTABLE INCOME—The total of earned and unearned income (after allowable disregards) not excluded by policy that is expected to be received by the filing unit for the budget/benefit month.

COUNTABLE INTEREST—Also known as “proportionate interest.” The fair market value of a property multiplied by an individual’s percentage of ownership.

COVERAGE REQUEST DATE—The date an individual requests Medicaid coverage. This date may or may not be the same as the application date. For example, on March 12, Mary applies and is approved for Medicaid for herself, but does not request coverage for her husband. Her application and coverage request date are both March 12. On May 9, Mary requests coverage for her husband. His coverage request date is May 9, but the application date is March 12 (as a new application cannot be required when other family members are receiving Medicaid). Any request for retro coverage is based on the coverage request date. In this scenario, Mary’s husband could request retro coverage for February, March and April, as those are the three months immediately preceding his coverage request date.

CREATOR—Used in terms of a trust, the person who creates a trust, also known as a "settlor" or "grantor".

CURRENT MARKET VALUE (CMV)—See Fair Market Value.

CURRENTLY AVAILABLE PROPERTY RESOURCES—Assets which an applicant or recipient has a legal right and reasonable practical ability to liquidate. Liquidation does not need to be possible immediately or within a given benefit month in order for an asset to be currently available.

D

DAC—Disabled Adult Child

DD—Developmentally Disabled

DDB—Disability Determination Services, a.k.a. Disability Determination Bureau

DDP—Developmental Disabilities Program

DDS—Disability Determination Services (see DDB)

DOC—Department of Corrections

DoLI—Department of Labor and Industry

DOR—Department of Revenue

DPHHS—Department of Public Health and Human Services

DEEMING—Considering a portion of income and resources of one person as the income and resources of a second person, whether or not actually available or contributed.

- ▶ **DEPENDENT CHILD**—For purposes of determining whether parental income is deemed from a parent to a blind or disabled child, a dependent child is a person who is under age 18 and who lives with the deemed parent or stepparent.
- ▶ When deeming from a parent to a child, or from an ineligible spouse to an eligible spouse, an ineligible child for whom an ineligible child allocation may be allowed is a minor child under age 18 who is living with the deemed parent or ineligible spouse, or a student child who has not yet attained age 21, and who is the natural or adopted child or stepchild of the deemed parent or ineligible spouse.

A minor child who is living independently, and not with a parent or stepparent is not considered a dependent child.
- ▶ For purposes of determining exemption of a home, a “dependent adult child” is one who is dependent upon his/her parent(s) and is claimed on the parents’ income taxes (or would be if the parents did not but could file an income tax return) as a dependent.

DISABILITY—The physical or mental impairment of an individual, based on criteria set out in Social Security Administration eligibility rules.

DISABLED—Permanently and totally disabled as determined by either Social Security Administration or MEDS, according to Social Security disability criteria.

DIVIDEND—A share of profits received by a stockholder or by a policy holder in a mutual insurance society.

DISABLED STUDENT—A disabled individual who is under age 22, and who is in a college or university at least 8 hours per week, or in grades 7-12 for at least 12 hours per week, or in a training course preparing for a paying job for at least 12 hours per week (15 hours if shop practice is involved), or for less time than indicated for reasons beyond the student's control such as illness, the nature of his/her disability, or lack of transportation.

DISREGARD—A dollar amount designated for a specific purpose (\$65 and ½ of earned income, legally obligated child support payment), which is deducted from the filing unit's income.

DOCUMENT—Used as a noun, indicates a written record on system case notes of the circumstances of an event or fact. Used as a verb, indicates the act of entering in the case file actual proof or statement of proof that the contents of the record are accurate.

E

EA—Emergency Assistance; also Eligibility Assistant

ECM—Eligibility Case Manager

EIC/EITC—Earned Income Credit/Earned Income Tax Credit

EARNED INCOME—Employee payments received in cash or in-kind for wages, tips, commissions, or net profit from activities in which the individual is engaged as self-employed; the gross income before deductions for personal or employment expenses or garnishments.

EARNED INCOME TAX CREDIT (EITC)—An amount of money which has been either deducted from the taxes owed or paid as a refund resulting from filing a Form 1040 or 1040A Tax Return for a calendar year. EITC is disregarded as income and as a resource in the month following receipt.

ELIGIBILITY FACTOR—A specified condition that an applicant must meet in order to qualify for benefits or a recipient must continue to meet to remain eligible for benefits.

ELIGIBLE—A person who meets all eligibility requirements for a specific program is considered to be qualified to receive benefits of that program.

EMERGENCY ASSISTANCE FOR NEEDY FAMILIES—A short-term program to assist families in an emergency caused by an unforeseen circumstance.

ENCUMBRANCE—A claim or legal debt(s) against a resource which is supported by a written document and which must be paid when the resource is sold.

ENUMERATION—The act of assigning a Social Security Number (SSN).

EPSDT—Early and Periodic Screening, Diagnosis and Treatment services for individuals under age twenty-one (21), who are covered by Medicaid.

EQUITY VALUE—The current market value less any encumbrances (legal debts such as mortgages, loans, penalties, cost of sale, etc.) against the property as of the date of evaluation.

ESSENTIAL FOR DAY-TO-DAY LIVING—As stated by the caretaker relative, the item is indispensable or necessary for the survival of the assistance unit.

ESTOPPEL—A legal principle that when an individual represents a material fact to a second individual, and the second individual reasonably changes his or her position in reliance on the representation, the first individual may not deny that the condition or fact exists. All instances where estoppel may be an issue must be referred to the Office of Legal Affairs through the RPS and Central Office policy specialist.

EVIDENCE—Something that furnishes proof (a document or a statement attesting to the validity of a particular event).

EX PARTE REVIEW—A review of household circumstances that is completed by the eligibility case manager when a Medicaid program closes, or when other household circumstances change. The purpose of this review is to determine if the child/family qualifies for a different subtype of Medicaid than the subtype currently open or the one being closed. Current information, already contained in the case record, is used to complete this review. Additional or updated information is requested when needed.

EXCLUDED RESOURCE—Any real or personal property that is not counted toward the general resource limitation.

EXTRA PAYCHECK—A payment (earned income) in addition to the usual number of payments made in a month. Extra paychecks are received four (4) times a year for people paid on a weekly basis and twice a year for people paid every other week.

F

FBDE—Full Benefit Dual Eligible

FC—Foster Care

FICA—Federal Insurance Compensation Act

FMA—Family Medicaid

FMV—Fair Market Value

FS—Food Stamps

FAIR HEARING—An opportunity for any person whose claim for assistance has been denied, or who had other negative action taken on their case, to present convincing evidence to reverse the original decision. Another interested party to the benefits, such as a medical provider, may also request a fair hearing.

FAIR MARKET VALUE (FMV)—The gross amount of money that the sale of property would bring on the open market in the community where the property is located. Encumbrances do not affect FMV.

FEE PATENT LAND—Land located on an Indian Reservation, but not under the control of the tribe or any other government entity. The landowner may be Native American or not Native American. When fee patent land is to be sold, the tribe must always be given the first opportunity to purchase the land. If the tribe declines the right to purchase, the owner does not need the permission of the tribe or BIA in order to sell the property, and may sell it to anyone (does not have to be purchased by someone of Native American descent). Fee patent land is taxable land.

FILING UNIT—Those individuals whose income and resources must be considered in eligibility determination. All members of the filing unit may not be included in the assistance unit and may not receive benefits.

- **FINALIZE**—In CHIMES, final authorization of a Medicaid determination resulting in issuance of benefits, denial of a request for coverage or closure of on-going eligibility.
- FULL BENEFIT DUAL ELIGIBLE**—An individual who is receiving both Medicare benefits (Part A and/or B) as well as a “full” Medicaid benefit (e.g. “regular Medicaid benefits”).
- G**
- GARNISHMENT**—A legal action to deduct a specified amount of money from an individual’s wages, unemployment compensation or other income to satisfy a creditor.
- GENERAL EQUIVALENCY DIPLOMA (GED)**—Training provided to individuals who require a high school education or its equivalent to obtain appropriate employment. The training prepares the individual for the GED test for a high school equivalency certificate.
- GOOD CAUSE**—An acceptable reason for an individual's action that overrides the penalty of that action. This reason applies to asset transfers, cooperation with Program Compliance, and Third Party Liability.
- GRANTOR**—The entity that creates a trust. The grantor may be a person, court or administrative body with legal authority to act on behalf of an individual. The grantor may be acting at the direction or request of an individual.
- GROSS EARNED INCOME**—The total money the person is entitled to receive prior to any deductions including garnishment.
- H**
- HIPAA**—Health Insurance Portability and Accountability Act of 1996
- HIPPS**—Health Insurance Premium Payment System
- HARD CARD**—The Montana Access to Health card. This is a Medicaid recipient’s permanent Medicaid ID card. Each recipient receives his/her own card, and should retain the card indefinitely, even if his/her Medicaid case closes.
- HISPANIC OR LATINO**—A person of Cuban, Mexican, Puerto Rican, South or Central America, or other Spanish culture or origin, regardless of race. The term, “Spanish origin,” can be used in addition to “Hispanic or Latino.”

► **HOME**—The principal place of residence of an individual and/or his or her spouse and/or his or her dependent child(ren). For resource purposes: a home is the principal place of residence which is owned or being purchased and which includes any building and the land upon which it is located, the land that appertains to the home and all the buildings located thereon. A mobile home (or mobile homes) located on real property may be excluded as part of a home if they are being lived in by the individual and/or his or her spouse and/or his or her dependent child(ren). (See definition of principal place of residence.)

HOMELESS—Neither having a fixed address nor living in a permanent dwelling.

HOUSEHOLD FURNISHINGS—Furniture, appliances, clothing and personal items owned by the filing unit.

I **ICF**—Intermediate Care Facility

ICF/MR—Intermediate Care Facility for the Mentally Retarded

IEVS—Income and Eligibility Verification System

IIM—Individual Indian Monies

INA—Immigration and Naturalization Act

IRA—Individual Retirement Account

IRS—Internal Revenue Service

IDENTIFICATION (ID) CARD—A hard plastic card that identifies the bearer, and gives a provide access to Medicaid eligibility information for that person. Possession of the card does not guarantee that the individual is actually Medicaid eligible.

INCAPACITY—A physical or mental defect, illness or impairment which is sufficiently serious as to eliminate or substantially reduce an individual's ability to function for day-to-day activities or employment.

INCARCERATION—The condition of being in prison or city/county jail, or a half way house under the control of the corrections system.

INCOME—Money (earned or unearned) received from any source.

- ▶ **INCOME GENERATING PROPERTY**—Countable liquid resources, such as annuities, savings accounts, and CDs that generate dividends, interest, or other passive income without the active participation of the owner. 'Income generating property' is a characteristic of the property that is used in CHIMES to connect a resource to the income it generates.
 - ▶ **INCOME-PRODUCING PROPERTY**—Non-liquid real or personal property that, in and of itself, produces income. For example, rental property is normally considered income-producing property. 'Income producing property' is a characteristic of property that is used in CHIMES to connect a resource to the income it generates, as well as triggering the 6%/\$6000 resource exclusion test (see MA 402-1).
- INCUR**—To become liable for something.
- INCURMENT**—That portion of a medically needy individual's or couple's income that exceeds the Medically Needy Income Level (MA 002); the amount of medical expenses for which the individual is responsible before Medicaid will begin paying any medical bills.
- INDEMNITY INSURANCE POLICY**—An insurance policy that pays a flat amount per day or per incidence only because a specific incident takes place (such as hospitalization or institutionalization), and not dependent on the insured incurring a financial obligation or expense due to the incident.
- INDEPENDENT LIVING ARRANGEMENT**—A living arrangement where the person is self-sufficient and does not rely upon another person or an institution to provide his/her food and/or shelter.
- INDIAN TRUST LAND**—Reservation land, held in government trust status, owned by either the tribal governing body or individual tribal members. The land may be used by the individual owner or leased to others for farming, grazing, mineral extraction or other uses. The land cannot be sold without BIA and/or tribal approval.
- INDIVIDUAL INDIAN MONEY (IIM) ACCOUNTS**—Accounts, similar to bank accounts, that are administered and maintained by the Bureau of Indian Affairs (BIA) Area Office or a designated agency on the reservation. The designated official at each agency can restrict IIM Accounts.
- INDIVIDUAL RETIREMENT ACCOUNT (IRA)**—A tax-deferred pension or plan which sets aside money now for the needs of the person after retirement.

INELIGIBLE—Not entitled to receive benefits because of not meeting one or more of the specified non-financial or financial requirements of eligibility.

INELIGIBLE ALIENS—Those aliens who are not eligible for Medicaid due to the temporary nature of their admission status.

INELIGIBLE CHILD—A dependent child (that is not blind or disabled) of a deemed parent, step-parent, or ineligible spouse, who lives in the same household as the deemed parent, step-parent, or ineligible spouse, and may* be allowed an ineligible child allocation when deeming from the parent to an eligible child or from the ineligible spouse to an eligible spouse. An ineligible child must be under 18, if not attending school, or under 21, if a student who meets the definition of a student. *An ineligible child allocation cannot be allowed for an ineligible child who is receiving SSI benefits, TANF cash assistance or BIA General Assistance.

INELIGIBLE SPOUSE—The Medicaid applicant's spouse, who is not eligible for Medicaid based on non-financial criteria (aged, blindness, disability, alien status, etc.). A spouse is not an ineligible spouse simply because s/he is not requesting or applying for Medicaid coverage.

INHERITANCE—Property received or anticipated to be received from a relative or other person by legal succession or will.

INITIAL ELIGIBILITY DETERMINATION—The act of evaluating eligibility factors for each applicant for assistance and finding each applicant eligible or ineligible.

IN-KIND INCOME—The receipt of goods or services (including vendor payments) instead of money that may be used to provide food or shelter, and must be counted in the determination of eligibility.

INMATE OF A PUBLIC INSTITUTION—An individual from the date of actual incarceration in a prison, county, city or tribal jail until permanent release, bail, probation or parole. An individual released from prison or jail due to a medical emergency, that would otherwise be incarcerated but for the medical emergency, is considered to be an inmate of a public institution.

INSTITUTION—An establishment that furnishes (in single or multiple facilities) food, shelter and treatment or services to four (4) or more persons who are unrelated to the proprietor.

INSURANCE SETTLEMENTS—The money received by a person or persons from a company for damage of property or person. Insurance payments to repair or replace damaged property are considered as excluded resources and are excluded for three months. Insurance payments for personal injuries are considered as income.

INSURED—The person who is covered by an insurance policy.

INSURER—The company or association that contracts with the insured person and is responsible for the payment of benefits.

INTENSIVE SERVICES REVIEW COMMITTEE (ISRC)—A statewide committee of representatives designated by the DD Program to review pre-admission screening materials and determine level of care requirements for individuals referred to intensive services. The ISRC maintains a register of individuals who meet level of care requirements to be used by the statewide local screening committees for selection decisions when an opening (in the waiver program) occurs.

INTEREST—A charge for a loan, or an amount earned by an amount on deposit; usually a percentage of the amount loaned or deposited.

INTERMEDIATE CARE FACILITY—A residential medical facility, known in federal regulations as a nursing facility, that provides health-related services above the level of room and board, and is certified and recognized under State law as a provider of such medical services. Residents must be admitted by a physician and continuously remain under a physician's care. An ICF is licensed and monitored by DPHHS.

INTERMEDIATE CARE FACILITY FOR THE MENTALLY RETARDED—A facility that provides intermediate care and active treatment to the mentally retarded or otherwise developmentally disabled. An ICF/MR is licensed and monitored by DPHHS.

INTERVIEW—To question or converse with a person face-to-face to obtain and give information. The Department cannot require an interview for ANY Medicaid program.

IRREGULAR INCOME—Income which is received at various time intervals or fluctuating amounts; does not follow a regular pattern.

IRREVOCABLE—That which cannot be terminated, amended or set aside.

ITEMS OF UNUSUAL VALUE—Household goods or personal effects that have a current market value of \$500 or more that are held as investments and not used for day-to-day living, which may be countable

J

JOINT POLICY—A life insurance policy that includes more than one person; usually covers both husband and wife, and pays out when the first of the insured individuals dies. Also known as a “first to die” policy.

JOINTLY OWNED PROPERTY—Presumed to be owned in equal shares by each of the persons holding a legal interest, unless otherwise specified in a legal document such as a deed or divorce decree. A court-ordered right of ownership takes precedence over any contrary verbal claim or stipulation on any document.

JOINT TENANCY—Each tenant has undivided interest in the whole of the property. Upon the death of one of the tenants, the undivided interest in the property reverts to the surviving tenants. Any real property can be divided. Refusal of one party to sell does not create an excluded resource. The real property may be partitioned and is a countable resource to the applicant.

JUDGMENT PAYMENTS—Per capita payments distributed to enrolled members of Indian tribes as a result of a lawsuit made against the United States Government. Such funds, as well as the interest they accrue, must be excluded from income and resources.

K

KEOGH—A tax deferred pension or plan for a self-employed individual to set aside money now for the their needs after retirement.

KNOWLEDGEABLE SOURCE—A person who has a considerable degree of familiarity of an individual or subject which has been gained through experience of or association with the individual or subject; a person who is professionally aware of the value of the property in the community or general area. For example, a real estate broker is a knowledgeable source on real property values; a person in the business of buying and selling contracts for deeds is a knowledgeable source on values of contracts for deeds.

L

LAPR—Legally Admitted Permanent Resident (alien)

LIEAP—Low Income Energy Assistance Program

LEASE INCOME—Payment distributed in accordance with a lease agreement.

LEVEL OF CARE DETERMINATION—A determination resulting from an assessment of functional abilities, psycho-social needs and medical conditions verifying the need for long term care services (institutional or home and community based services).

LEGAL RECORDS—Documents of transactions conforming to or permitted by law.

LEGALLY OBLIGATED—Court-ordered

LIEN—A security interest or claim upon real or personal property to ensure satisfaction of a debt. The lien amount must be paid up in order for title to property to be transferred from one owner to another.



LIFE ESTATE--An interest in real or personal property that is limited in duration to the lifetime of its owner or some other designated person or persons. A life estate is personal property, even when it is the right to use real property.

LIFE INSURANCE—A contract (policy) where the policy owner pays premiums during his/her lifetime and the company pays the face value of the policy to the beneficiaries upon the death of the insured.

LIQUID RESOURCES—Cash and other non-cash resources that can be readily converted to cash. Examples of resources that are ordinarily liquid include (but are not limited to) stocks, bonds, mutual fund shares, promissory notes, mortgages, life insurance policies, and financial institution accounts.

LIVING ARRANGEMENT—For Medicaid purposes, the situation in which an individual or couple is living: living independently, living in the household of another or living in a medical institution.

LOAN—A transaction in which money is given to another and must be repaid.

LOAN VALUE—See “Cash Surrender Value”

LOCAL SCREENING COMMITTEE—Statewide committees of representatives (designated by the Developmental Disabilities Program) responsible for placement decisions when intensive service openings occur. The committees review minimal needs and services for individuals accepted for intensive services to be used by the Individual Habilitation Planning Team in developing the plan of care.

LONG TERM CARE—Extended medical care received on an in-patient basis.

LUMP SUM PAYMENT—A payment of earned or unearned money; the total amount less (1) legal fees required to make the money available; and (2) the amount designated to the payer or source for medical expenses.

M

MA—Medicaid

MAO—Medicaid Only

MCA—Montana Codes Annotated

MEDS—Medicaid Eligibility Disability Services

MIMS—Montana Income Maintenance System

MISTICS—Montana Integrated System to Improve Customer Services. The Montana DoLI on-line system available to eligibility system users to verify unemployment insurance benefits.

MMIS—Medicaid Management Information System

MNIL—Medically Needy Income Level



MPQHF—Mountain Pacific Quality Health Foundation. MPQHF is the contractor to Montana Medicaid for both nursing home level of care screening and Medicaid travel. Also known as “The Foundation.”

MQT—Medicaid Qualifying Trust

MR—Mentally Retarded

MSH—Montana State Hospital (formerly known as Warm Springs State Hospital)

MAINTENANCE—The act of providing the supplies or funds needed to live on.

MEDICAID—The program for the payment of covered medical expenses for persons who are eligible.

MEDICAL INSTITUTION—An establishment organized to provide medical care (including nursing and convalescent care) by professional personnel in accordance with state licensing standards. Medical institutions include institutions for mental retardation, mental disease and tuberculosis, or nursing homes.

MEDICALLY NEEDY—An individual or couple that is otherwise eligible for Medicaid but whose income **exceeds** the benefit standard (MA 001) for the categorically eligible. A medically needy case may or may not have an incurment.

MINERAL RIGHTS—The ownership or interest in land below the surface.

MINOR CHILD—For aged, blind, and disabled Medicaid, a person who has not yet attained his or her 18th birthday.

MONTANA ACCESS TO HEALTH CARD—A Medicaid recipient's permanent hard plastic Medicaid ID card. Possession of the card does not guarantee Medicaid eligibility.

MONTH RECEIVED—The benefit month in which money may be available to the applicant or recipient or in which the person will receive the money in-hand. SSA and SSI payments are exceptions to this definition, when the payment is made at the end of a month (usually because of holiday mail) for use during the following month.

MUTUAL FUND—A company without fixed capitalization, freely buying and selling its own shares and using its capital to invest in other companies.

N

NADA—National Automobile Dealer's Association

NH—Nursing home.

NATIVE HAWAIIAN OR PACIFIC ISLANDER—A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

NEGOTIABLE INSTRUMENT—A written unconditional agreement signed by a person who promises to pay a specific sum of money at a specific time or on demand to the person, company, corporation or institution named on the note. A negotiable instrument may or may not involve the loan of money or goods.

NET COUNTABLE INCOME—Includes all non-excluded earned income and all non-excluded unearned income, less applicable disregards and deductions.

NET PROFIT—Gross revenue less allowable business expenses.

NON-EXEMPT (COUNTABLE)—Income and resources counted, in whole or in part, to determine eligibility.

NON HISPANIC/LATINO—A person who is not Hispanic or Latino according to the definition stated earlier.

NON-LIQUID RESOURCES—Resources which cannot reasonably be converted to cash within 20 working days. The term may be applied to either real or personal property. A resource which has been determined to be non-liquid for any reason is not considered inaccessible or excluded simply because the value of the asset cannot be accessed in the benefit month.

NON-RESCINDABLE—Cannot be voided, repealed or annulled.

NOTICE OF ACTION—

1. CONTENT

Complete Notice —Written notice that includes the action the agency intends to take, the reason for the action, the agency policy and state and federal regulations supporting the action, the right to request a fair hearing, the person to contact for additional information, the availability of continued benefits and liability for such benefits if found ineligible in the hearing decision.

2. TIMELINESS

- a. Adequate Notice — Written notification as stated above, to be received by the individual no later than the date of action or the date payment would have been received.
- b. Timely Notice — Written notification as stated above, mailed ten (10) days prior to the date of action.

System notices are mailed the working day **after** they are sent from the system, and are not mailed on weekends or holidays.

3. Ten-day notice period — the ten (10) consecutive days immediately following the day the notice was mailed.

O

OJT—On the Job Training

OPA—Office of Public Assistance

ON-GOING ELIGIBILITY DETERMINATION—The act of evaluating each open case and finding the case eligible or ineligible.

ONE-THIRD REDUCTION RULE—Applies to an applicant or recipient for whom both food and shelter are provided by another household, individual, or entity for a full calendar month. The value of free food and shelter is considered to be one-third the monthly SSI SPA.

OTHERWISE ELIGIBLE—Means the individual is not precluded from eligibility by some other provision of Title IV-A of the Social Security Act and the individual meets all the program requirements.

OVERISSUANCE— Benefits received by or for an assistance unit for which that unit was not eligible.

OWNER—In the case of a life insurance policy, the person who has the right to change the policy; normally the person who pays the premium.

P

PAB—Public Assistance Bureau

PC—Program Compliance

PCA—Program Compliance Auditor



PJUSTICE—Department of Justice/Motor Vehicles system access

PMV—Presumed Maximum Value

PRUCOL—Permanently Residing Under Color of Law

PARENT—A natural, adoptive or step-parent.

PAYEE—The person in whose name the benefits are issued. The payee may be the individual to whom the payment is obligated, an eligible or ineligible parent, an eligible or ineligible caretaker relative or a protective payee.

PAYMENT—The act of giving a check or warrant to the payee or the legal representative.

PENAL INSTITUTION—Any facility in which an individual may be lawfully held against his will by federal, state or local authorities.

PENSION FUND—An investment account (typically with an employer) that is intended to provide income at retirement.

PENSION PAYMENT—A sum of money paid regularly as a retirement or disability benefit.

PER CAPITA PAYMENT—Income from Indian-owned property that is distributed equally to all tribal members. This may include Indian casino profits.

PER DIEM—Per day; pertains to expenses for cost of meals and lodging.

PERJURY—A willful false statement of a material fact; swearing to what is untrue; or, incompletely answering all questions under oath.

PERSONAL CARE ATTENDANT—An individual who provides daily personal care to qualified Medicaid clients.

PERSONAL EFFECTS—Those items of personal property which are worn or carried on the person. Such items include but are not limited to clothing, jewelry, medical prosthetics, recreational equipment, musical instruments, etc.

PERSONAL INJURY INSURANCE—A policy purchased from a company whereby the company makes cash payment to the policyholder in the event of proven medical injury or accident. A personal injury insurance policy is one type of indemnity insurance policy.

PERSONAL PROPERTY—All non-real property owned or possessed by an individual.

PICKLE ELIGIBILITY—Medicaid eligibility criteria under which Medicaid is provided to an individual who is receiving Social Security benefits (not SSI), was receiving SSI or SSP and Social Security benefits concurrently but became ineligible for SSI/SSP payments; and has countable income (after certain cost of living increases are deducted) below the current standard payment amount or SSP amount. See MA 201-3.

PLAN OF CARE—A written plan of treatment developed on the basis of an assessment and determination of the individual's needs.

PRE-ADMISSION SCREENING—A screening that must be accomplished prior to admittance to the Home and Community Based Services program or a nursing facility (or prior to Medicaid eligibility while residing in a nursing facility). It consists of a level of care determination and a Pre-Admission Screening and Annual Resident Review (PASARR).

PREMIUM—The consideration paid for an insurance contract (policy).

PRIMARY BENEFICIARY—For Social Security RSDI benefits, a person who has worked the specified number of quarters and is eligible for retirement or disability benefits in his/her own right. For a trust, the individual(s) who have first right to the benefits of the trust.

PRIMARY EVIDENCE—A document or record by an official government agency or public institution that would be accepted in a judicial proceeding as establishing the truth.

PRINCIPAL—The capital or main body of an estate or financial holding as distinguished from the interest or revenue from it.

PRINCIPAL PLACE OF RESIDENCE—A person's principal place of residence is the one property in which the individual, the individual's spouse, or the individual's dependent (minor or adult) child currently resides, or has resided in within the previous six months, provided they intend to return after temporary absences. A property ceases to be a principal place of residence if the person/family has been continuously residing off the property (including in a residential medical facility) for a period of six months or more.

PROGRAM OPERATIONS MANUAL SYSTEM OF THE SOCIAL SECURITY ADMINISTRATION (POMS)—This is the operating procedures for the programs administered by the Social Security Administration, including SSI.

PROGRAM REQUIREMENT—Specifications as to how eligibility factors are to be met.

PROPORTIONAL INTEREST—When there are two or more owners of real property, the property may be divided into equal or unequal shares (three individuals may own a whole property with the ownership interests being 50%, 25% and 25% respectively).

PRORATE—Divide or distribute benefits proportionally based on number of days eligible.

PROSPECTIVE OR PROSPECTED BUDGETING—Using the best estimate of the income and circumstances that may exist in the benefit month to determine eligibility and compute countable income.

PROTECTIVE PAYEE—The person, other than the individual to whom the payment is legally obligated, to whom payment is made and who is managing the funds for the purpose of safeguarding the health and welfare of the person to whom the payment is legally obligated.

PROVIDER—A person or business who provides goods or services to clients; usually a medical provider (e.g., physician, hospital, etc.)

PUBLIC (NON-MEDICAL) INSTITUTION—An institution that is the responsibility of a governmental unit or over which a governmental unit exercises administrative control.

Q

QA—Quality Assurance

QA REVIEWER—Quality Assurance Reviewer. This is a regional reviewer position.

QC—Quality Control (a.k.a. Program Compliance)

QDWI—Qualified Disabled Working Individual

QI, OR QI-1—Qualifying Individual, see MA 800.

QMB—Qualified Medicare Beneficiary

R

RAC—Refugee Assistance Center

RCA—Refugee Cash Assistance

RMA—Refugee Medical Assistance

RPS—Regional Policy Specialist: A PAB employee in each region whose primary function is to act as a general policy specialist for that region. The RPS also acts as a liaison between the county staff and Central Office.

RQA—Regional Quality Assurance Specialist: An employee in each region whose primary function is to randomly review cases throughout the

region. The RQA also provides information to Regional Management and Central Office staff regarding regional error trends.

RSDI—Retirement, Survivors and Disability Insurance

REAL PROPERTY—Land and buildings or immovable objects permanently attached thereto.

RECIPIENT—A person who is eligible for and receiving Medicaid.

RECONCILE—To compare two events and adjust for the difference.

REFUGEE—An alien who has been admitted to the United States under the classification of refugee. This person is required to carry a Form I-94 endorsed to show refugee status. Employment is permitted.

REGIONAL PROGRAM OFFICER—A Department employee who represents the Community Services Bureau (Senior and Long Term Care Division) for a district locality.

REGULAR MEDICAID—Full or basic Medicaid coverage; not QMB, SLMB or QI.

REMEDIAL EDUCATION—Training necessary to raise an individual's functional educational level to the point at which they can successfully enter employment.

RESCIND—To make void; repeal or annul.

RESIDENT—A person who states intent to reside in Montana, who is present in the State (or temporarily absent for a reason other than establishing residence in another state), and who is not receiving assistance from another state or claiming residence in another state.

RESIDENT OF A MEDICAL INSTITUTION—An individual living in a residential medical institution to receive professional services under a physician's direction for maintenance, improvement or protection of health (e.g., a nursing home resident).

RESOURCES—Resources include but are not limited to all real and personal property owned by a person, as well as money or any property that can be converted into supplies, services or benefits; the means of raising money or supplies; the capabilities of raising wealth to supply necessary wants or needs; or the available means or capability of any kind.

RETROACTIVE—To make effective as of a date prior to enactment.

REVOCABLE—Can be amended, cancelled or terminated.

ROOM AND/OR BOARD INCOME—Money received for providing meals and/or rooms to people not included in the filing unit.

ROYALTY—Payment to the owner of a copyright, patent or mineral right.

S

SAVE— Systematic Alien Verification for Entitlement

SCORE—Service Corps of Retired Executives

SDX—State Data Exchange

SEOG—Student Education Opportunity Grant

SLMB—Special Low-Income Medicare Beneficiary

SNF—Skilled Nursing Facility

SOLQ—State On Line Query. Montana's access to Social Security Administration information.

SPA—Standard Payment Amount (for SSI)

SSA—Social Security Administration

SSDI/SSDIB—Social Security Disability Insurance Benefits

SSI—Supplemental Security Income

SSIG—State Student Incentive Grant

SSN—Social Security Number

SUA—Standard Utility Allowance

SKILLED NURSING FACILITY—A nursing home licensed by Medicare to provide residential medical services to patients that require a level of medical care as defined in Federal regulations.

SOLE OWNERSHIP—When property is owned wholly and completely by one individual or entity, other than liens and other legal encumbrances.

SPECIALIZED FAMILY CARE REVIEW PANEL (SFCRP)—A state level panel of representatives designated by the Developmental Disabilities Program for determination of level of care for children referred to Specialized Family Care services. The panel prioritizes children for the services according to need and reviews proposed minimal needs and services, to assist in administrative selection decisions for service openings.

SPOUSE—One who would be defined as married under applicable State (or tribal) law where the individual resides. May include a common-law spouse.

STANDARD PAYMENT AMOUNT—The SSI monthly cash payment standard for qualifying individuals or couples.

STEPPARENT—The spouse of the natural or adoptive child's parent.

STRAIGHT LIFE INSURANCE POLICY—See "Whole Life Insurance Policy."

STRIKE—Any concerted stoppage of work by employees, including a stoppage by reason of the expiration of a collective bargaining agreement, and any concerted slow-down or other concerted interruption of operations by employees.

STUDENT—A disabled individual under age 22, or a non-disabled dependent child under age 21 who is in a college or university at least 8 hours per week, or in grades 7-12 for at least 12 hours per week, or in a training course preparing for a paying job for at least 12 hours per week (15 hours if shop practice is involved), or for less time than indicated for reasons beyond the student's control such as illness, the nature of his/her disability, or lack of transportation.

SWING BED—A temporary bed for long term care in an approved hospital when a nursing home bed is not available within a 25-mile radius.

T

TANF—Temporary Assistance for Needy Families

TC—TANF Cash Assistance

TEAMS—The Economic Assistance Management System

TPL—Third Party Liability

TPQY—Third Party Query

TAX YEAR—The year on which the income taxes are based; usually the calendar year.

TEMPORARY ABSENCE—The condition created when a household member is away from the home for a specified period of time.

TENANCY IN COMMON—Each tenant (owner) has undivided possession of a distinct interest in, and title to, the whole of the property. Upon the death of one of the tenants, the interest in and title to the property descends to his/her heirs.

When an individual is a tenant in common, the equity in the individual's proportionate interest of the whole is a countable resource. Proportionate interest of the whole is not always one-half when there are two tenants or one-third when there are three tenants. Equity must be verified.

TENANCY BY THE ENTIRETY—The tenants are always husband and wife and each has an undivided interest in the whole of the property.

When the husband and wife are an aged/blind/disabled couple or a blind/disabled child's deemed parents, the equity in the property is a countable resource. When one spouse is not financially responsible for the other (see MA 601-2), is not a deemed parent or an alien sponsor, only one-half of the equity is a countable resource to the spouse whose resources are being used to determine Medicaid eligibility.

TERM INSURANCE—One of the two basic types of life insurance policies. The owner pays premiums for a specified period and the insurer agrees to pay the face value of the policy only if the insured dies within the time specified by the policy. The face value of term life insurance may decrease over the life of the policy or remain static. This type of life insurance has no cash surrender value and is not a resource to the owner, the insured or the beneficiary.

TERMINATION—To close a case and/or remove an individual from program eligibility.

THIRD PARTY—Any individual, entity or program that is or may be liable to pay all or part of the medical costs of injury, disease or disability of an applicant or recipient.

TIME DEPOSIT—A contract between an individual and a financial institution where the individual deposits funds for a specified period of time.

TRANSFER DATE—The date on which delivery is made on a valid transfer.

TRANSFER OF PROPERTY—Giving to another the legal or individual proportionate right or title to real or personal property or a stream of income. Transfers to joint tenancy or to tenancy in common are included in this definition. Includes such actions as selling property, giving property away, establishing a trust, contributing to a charity or other organization, removing one's name from a joint bank account, adding another's name to a deed or account, or forgiving a debt.

TRANSPORTATION—Travel by public conveyance or private vehicle to secure medically necessary examination and treatment. Transportation does not include ambulance service or specialized transportation for the disabled.

TRIAL WORK PERIOD—A period during which an SSI or SSDIB recipient may test his/her ability to work. During this period, the person is considered disabled.

TRUST—A legal agreement in which title to property is held by one party (the trustee) for the benefit of a beneficiary (the trustee may or may not be the beneficiary). A trust may or may not include the word "trust" in the document.

TRUST PRINCIPAL—The real or personal property that is the object of a trust.

TRUSTEE—The person(s) given the authority, by a written contract, to manage money set up in a trust.

TRUSTOR—The entity who creates a trust. The trustor (a.k.a. "grantor") may be any person or entity, including a court or administrative body, with legal authority to act on behalf of the individual or any person, including a court of administrative body, acting at the direction or request of the individual.

U

UC or UIB—Unemployment Compensation or Unemployment Insurance Benefits

USCIS—United States Citizenship & Immigration Services (formerly INS)

UNCOMPENSATED VALUE—The current market value of a resource minus the amount of compensation received by the individual in exchange for the resource (if less than the current market value).

UNEARNED INCOME—All money received that is not earned by providing goods or services (work). Unearned income includes, but is not limited to gifts, Social Security benefits, Veterans' benefits, Workers' Compensation payments, Unemployment Compensation payments, and returns from capital investments which the individual himself is not actively engaged.

UNPAID PRINCIPAL—The amount that remains to be paid on an agreement or loan.



UTILITIES—The services provided for water, sewer, electricity, garbage, telephone, and heating fuel.

V

VISTA—Volunteers In Service To America

VR—Vocational Rehabilitation

VEHICLE—Any conveyance used to provide transportation.

VENDOR—The person or business who provides goods or services. See also, "Provider."

VERIFY—To check, confirm or establish whether a statement or condition is true or accurate by obtaining a copy, viewing a copy or obtaining a verbal description of the evidence.

W

WAGES—Payment for services to a worker; remuneration on an hourly, daily, or other periodic basis or by the piece.

WHOLE LIFE INSURANCE POLICY—One of two basic types of life insurance policies where the owner pays premiums during his/her lifetime and the insurer pays the face value of the policy to the beneficiaries upon the death of the insured. Usually has a cash surrender value after a period of time. Also referred to as "straight life" insurance.

WHITE—A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.



WINDFALL—See lump sum payment.

X

Y

Z

nc

o O o